

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on			<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 09 / 10 / 2012</div> </div>		

  

Full Name (Last, First, Middle Initial) of Payee <b>Lexicon</b>			Date <div style="display: flex; justify-content: space-around; border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 09 / 08 / 2012</div>		
Mailing Address 10300 Farnham Drive			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">10.00</div>		
City <b>Bethesda</b>	State <b>MD</b>	Zip Code <b>20814</b>	Transaction ID : <b>D448667</b>		
Purpose of Expenditure Design Fliers		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: <b>00</b>		
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Willard Mitt Romney</b>			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">198749.45</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		

  

Full Name (Last, First, Middle Initial) of Payee <b>Lexicon</b>			Date <div style="display: flex; justify-content: space-around; border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 09 / 08 / 2012</div>		
Mailing Address 10300 Farnham Drive			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">10.00</div>		
City <b>Bethesda</b>	State <b>MD</b>	Zip Code <b>20814</b>	Transaction ID : <b>D448669</b>		
Purpose of Expenditure Design Fliers		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>FL</b> District: <b>00</b>		
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BILL NELSON</b>			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">17455.61</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		

  

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">20.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Signature \_\_\_\_\_ Date 

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2012